

NOAA Form 56-56 (5/01)  U.S. Department of Commerce National Oceanic and Atmospheric Administration		1. OMAO ASSIGNED CLEARANCE NUMBER	
		2. CONTRACT/PO NUMBER OR WRITE VISA IF USING CREDIT CARD	
INSTRUCTIONS: The purpose of the Commercial Aviation Services Report is to provide the Office of Marine and Aviation Operations with the information necessary to perform its responsibility for tracking all utilization of commercial aviation services to support NOAA missions. The completed report is to be submitted within 30 days after completion of the project, or not less than quarterly on projects exceeding 90 days in length.  MAIL OR FAX COMPLETED FORM TO: NOAA Office of Marine and Aviation Operations, Program Services and Outsourcing Division, 1315 East-West Highway, SSMC#3, Room 12872,Silver Spring, MD 20910. Fax: 301-713-1541, Phone: 301-713-1045. <b>Enclose Copy of Purchase Order/Contract/Receipt</b>			
3. FROM: (Routing Code)		4. POINT OF CONTACT (Name & Phone)	
		5. CONTRACTING OFFICER (Name & Phone)	
6. PROJECT NAME (Or brief description of Mission)			
7. PROJECT AREA (Staging area and area of Operation)			
8. TYPE AIRCRAFT USED (Airplane/Helicopter)		9. PERFORMANCE OF VENDOR (Evaluate degree of satisfaction with vendor while conducting the Project/Mission) (Circle One)	
		1                      2                      3                      4                      5	
10. COST/FLIGHT HOUR INFORMATION			
A. PROJECT DATES			
B. TOTAL NUMBER OF FLIGHT HOURS			
C. IN HOUSE (PAID TO NOAA ENTITY)		\$	
D. PAID OUT COST (EXTERNAL COST)		\$	
E. TOTAL COST		\$	
CHARTER AIRCRAFT IDENTIFICATION			
11. NAMES OF PILOT, CREW, AND PASSENGERS (specify who is who)		12. AIRCRAFT MAKE, MODEL, & TAIL NUMBER:	
		13. VENDOR NAME, ADDRESS, & PHONE	
14. CAMS Accounting Classification Codes:			